FEC

Only

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Honda Victory Fund 250 Gateway PI, Suite 100 ADDRESS (number and street) **PMB 218** (Check if address is changed) San Jose 95110 CA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS hondavictoryfund@gmail.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2016 C00608810 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Michael Beckendorf Type or Print Name of Treasurer Michael Beckendorf [Electronically Filed] 02 10 2016 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

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		OMMITTEE	
Car	ndidate	Committee:	
(a)	Ш	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Compinformation below.)	elete the candidate
Nam Can	ne of didate		
	didate y Affiliatio	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		
Par	ty Con	nmittee:	
(d)		· · · · · · · · · · · · · · · · · · ·	Democratic, Republican, etc.) Party.
Poli	itical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.	nected organization is a
		Corporation Corporation w/o Capital Stock	Labor Organization
		Membership Organization Trade Association	Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	·
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate secommittee. (i.e., nonconnected committee)	gregated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Join	ıt Fund	raising Representative:	
(g)	×	This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	MIKE HONDA FOR CONGRESS FEC ID number C C003	51379
	2.	CALIFORNIA DEMOCRATIC PARTY FEC ID number C C001	05668
	3.	FEC ID number	
	4.		

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Write or Type Committee Na		. ago o
Honda Victory	Fund	
	Organization, Affiliated Committee, Joint Fundraising Represent	tative, or Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY STA	ATE ZIP CODE
Relationship: Connec	ted Organization Affiliated Committee Joint Fundraising Repre	esentative Leadership PAC Sponsor
 Custodian of Records: Id books and records. 	lentify by name, address (phone number optional) and position of	the person in possession of committee
Michael Full Name	Beckendorf	
	2050 Gateway PI, Suite 100	
Mailing Address	PMB 218	
	San Jose CA	A 95110
Title or Position	CITY STAT	E ZIP CODE
Treasurer		
8. Treasurer: List the name a any designated agent (e.g.	and address (phone number optional) of the treasurer of the comm, assistant treasurer).	nittee; and the name and address of
Tall Name	Beckendorf	
of Treasurer	2050 Gateway PI, Suite 100	
Mailing Address		
	PMB 218	
	San Jose CA	
Title or Position , Treasurer	CITY STATI	E ZIP CODE
I Treasurer	Telephone number	

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Full Name of Designated		
Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
Banks or Other safety deposit bo Name of Bank, [Bank of America	accounts, rents
safety deposit bo	oxes or maintains funds. Depository, etc.	accounts, rents
safety deposit bo Name of Bank, [Depository, etc. Bank of America 125 S Market St San Jose CA 95113	zip code
safety deposit bo Name of Bank, [Depository, etc. Bank of America 125 S Market St San Jose CITY STATE	
safety deposit bo Name of Bank, I	Depository, etc. Bank of America 125 S Market St San Jose CITY STATE	
safety deposit bo Name of Bank, I	Depository, etc. Bank of America 125 S Market St San Jose CITY STATE Depository, etc.	
safety deposit bo Name of Bank, [Mailing Address Name of Bank, [Depository, etc. Bank of America 125 S Market St San Jose CITY STATE Depository, etc.	
safety deposit bo Name of Bank, [Mailing Address Name of Bank, [Depository, etc. Bank of America 125 S Market St San Jose CITY STATE Depository, etc.	